

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA
2001/02
FORM

COVER PAGE
460

Page 1 of 100

For Official Use Only

Statement covers period

from 07/01/2016

through 09/24/2016

Date of election if applicable: (Month, Day, Year)

06/07/2016

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

☒ Officeholder, Candidate Controlled Committee

☒ State Candidate Election Committee

☐ Recall

(Also Complete Part 5.)

☐ General Purpose Committee

☐ Sponsored

☐ Small Contributor Committee

☐ Political Party/Central Committee

☐ Ballot Measure Committee

☐ Primary Formed

☐ Controlled

☐ Sponsored

(Also Complete Part 6.)

☐ Primary Formed Candidate/
Officeholder Committee

(Also Complete Part 7.)

2. Type of Statement:

☒ Pre-election Statement

☐ Semi-annual Statement

☐ Termination Statement

☐ Amendment (Explain below)

☐ Quarterly Statement

☐ Special Odd-Year Report

☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1373710

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Marc Steinorth for Assembly 2016

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Rancho Cucamonga</u>	<u>CA</u>	<u>91701</u>	<u>(909)238-8900</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Santa Ana</u>	<u>CA</u>	<u>92705</u>	

OPTIONAL: FAX/E-MAIL ADDRESS
lysaray.campaignservices@gmail.com

Treasurer(s)

NAME OF TREASURER
Lysa Ray

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Santa Ana</u>	<u>CA</u>	<u>92705</u>	<u>714-540-2295</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 09/27/2016 By Lysa Ray
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 09/27/2016 By Marc Steinorth
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee
Campaign Statement
Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

Page 2 of 100

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Marc Steinorth

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Held: State Assembly Person
Assembly District

40

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Alta Loma CA 91737

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 3 of 100
		I.D. NUMBER 1373710

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$316,994.00	\$793,381.14
2. Loans Received	Schedule B, Line 7	\$4,200.00	\$62,600.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$321,194.00	\$855,981.14
4. Nonmonetary Contributions	Schedule C, Line 3	\$267,302.53	\$293,442.13
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$588,496.53	\$1,149,423.27

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$451,234.31	\$556,959.30
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$451,234.31	\$556,959.30
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	\$0.00	\$0.00
10. Nonmonetary Adjustment	Schedule C, Line 3	\$267,302.53	\$293,442.13
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$718,536.84	\$850,401.43

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy) Total to Date

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$720,304.50	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$321,194.00	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.00	
15. Cash Payments	Column A, Line 8 above	\$451,234.31	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$590,264.19	
If this is a termination statement, Line 16 must be zero.			

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$62,600.00

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from 07/01/2016		
through 09/24/2016		Page 4 of 100
NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/14/2016	Abate PAC Hesperia, CA 92345 Committee ID: 881714	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	2016G: \$250.00
9/16/2016	Abo Enterprises Co San Bernardino, CA 92405	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$400.00	\$400.00	2016G: \$400.00
8/29/2016	Affordable Housing PAC Agoura Hills, CA 91301 Committee ID: 1349036	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$3,000.00	2016P: \$3,500.00 2016G: \$2,000.00
8/16/2016	Agua Caliente Band of Cahuilla Indians Palm Springs, CA 92264	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,900.00	2016P: \$3,200.00 2016G: \$4,200.00
9/11/2016	Allergan Irvine, CA 92612	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00

SUBTOTAL

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$316,919.00
2. Amount received this period - unitemized contributions of less than \$100	\$75.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$316,994.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u>		CALIFORNIA FORM 460
through <u>09/24/2016</u>		
		Page <u>5</u> of <u>100</u>
		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/13/2016	Allergan Irvine, CA 92612	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,500.00	2016G: \$1,500.00
9/20/2016	***RETURNED*** Allergan Irvine, CA 92612 Memo Reference: EXP1177	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		(\$1,000.00)	\$1,500.00	2016G: \$1,500.00
8/24/2016	Alliance of Automobile Manufacturers CA Sacramento, CA 95814 Committee ID: 1305799	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
9/8/2016	Philip Morris USA Altria Client Services Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016P: \$4,200.00 2016G: \$4,200.00
8/24/2016	Amazon.com Seattle, WA 98109	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,350.00	\$2,350.00	2016P: \$1,850.00 2016G: \$2,350.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 07/01/2016 through 09/24/2016		CALIFORNIA FORM 460 Page 6 of 100
I.D. Number 1373710		

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NAME OF FILER
Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/8/2016	Anheuser Busch Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,200.00	\$5,400.00	2016P: \$4,200.00 2016G: \$4,200.00
8/11/2016	Anthem Blue Cross Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$3,500.00	2016P: \$4,200.00 2016G: \$2,300.00
7/11/2016	Apartment Association of Greater Los Angeles PAC Los Angeles, CA 90005 Committee ID: 811735	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$1,500.00	2016P: \$2,500.00 2016G: \$500.00
8/2/2016	Assoc of CA State Supervisors Sacramento, CA 95814 Committee ID: 1303937	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$4,250.00	2016P: \$4,200.00 2016G: \$3,050.00
9/2/2016	Assoc of California Insurance Companies Sacramento, CA 95814 Committee ID: 830078	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 07/01/2016 through 09/24/2016		CALIFORNIA FORM 460 Page 7 of 100
I.D. Number 1373710		

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NAME OF FILER
Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/11/2016	Associated General Contractors PAC West Sacramento, CA 95691 Committee ID: 890194	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$6,200.00	2016P: \$4,000.00 2016G: \$4,200.00
8/26/2016	Associated General Contractors PAC West Sacramento, CA 95691 Committee ID: 890194	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$700.00	\$6,200.00	2016P: \$4,000.00 2016G: \$4,200.00
8/2/2016	AT&T Inc & its Affiliates Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,200.00	2016P: \$4,200.00 2016G: \$4,200.00
9/23/2016	AT&T Inc & its Affiliates Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$3,200.00	2016P: \$4,200.00 2016G: \$4,200.00
9/20/2016	Auto Club Speedway Fontana, CA 92335	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$2,000.00	2016P: \$2,500.00 2016G: \$1,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u> through <u>09/24/2016</u>		CALIFORNIA FORM 460 Page <u>8</u> of <u>100</u> I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/23/2016	Paul Barich Redlands, CA 92373	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Barich & Assoc Broker	\$2,500.00	\$5,000.00	2016P: \$4,200.00 2016G: \$2,900.00
9/7/2016	Barona Band of Mission Indians Lakeside, CA 92040	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016P: \$4,200.00 2016G: \$4,200.00
9/16/2016	Bates Auto Supply San Bernardino, CA 92408	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	2016G: \$250.00
8/18/2016	BCM Group Rancho Cucamonga, CA 91730	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2016P: \$150.00 2016G: \$500.00
7/2/2016	Alan Bergman Redlands, CA 92374	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	\$100.00	2016G: \$100.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u>	CALIFORNIA FORM 460
through <u>09/24/2016</u>	
Page <u>9</u> of <u>100</u>	

SEE INSTRUCTIONS ON REVERSE

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I.D. Number

1373710

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/11/2016	Albert Bernal Yuba City, CA 95993	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	\$100.00	2016G: \$100.00
7/25/2016	Birdgroup Construction Rancho Cucamonga, CA 91739	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016P: \$1,000.00 2016G: \$4,200.00
8/30/2016	Larry Bowls Redlands, CA 92374	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	\$100.00	2016G: \$100.00
7/19/2016	Building Owners & Managers Assoc. Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
9/20/2016	Burrtec Waste Fontana, CA 92335	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2016P: \$4,200.00 2016G: \$2,800.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 07/01/2016 through 09/24/2016		CALIFORNIA FORM 460 Page 10 of 100 I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/15/2016	CA Assoc of Health Plans PAC Sacramento, CA 95814 Committee ID: 950541	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$4,500.00	2016P: \$4,200.00 2016G: \$3,300.00
8/2/2016	CA Bankers Association State PAC Sacramento, CA 95814 Committee ID: 742694	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$4,000.00	2016P: \$4,000.00 2016G: \$2,000.00
9/19/2016	Ca Financial Services PAC Sacramento, CA 95821 Committee ID: 881022	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2016G: \$2,000.00
8/11/2016	CA League of Food Processors PAC Sacramento, CA 95814 Committee ID: 760553	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
9/22/2016	CA Motorcycle Dealers Assoc Lake Elsinore, CA 92530 Committee ID: 760986	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	2016G: \$250.00
SUBTOTAL						

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 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u>		CALIFORNIA FORM 460
through <u>09/24/2016</u>		
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NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/13/2016	CALCANCER PAC CA Oncology PAC Sacramento, CA 95814 Committee ID: 1266808	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,250.00	\$1,250.00	2016P: \$1,000.00 2016G: \$1,250.00
8/2/2016	Ca Professional Firefighters PAC Sacramento, CA 95833 Committee ID: 744058	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$11,000.00	2016P: \$8,500.00 2016G: \$8,500.00
9/16/2016	Ca Professional Firefighters PAC Sacramento, CA 95833 Committee ID: 744058	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$6,500.00	\$11,000.00	2016P: \$8,500.00 2016G: \$8,500.00
8/18/2016	CA Refuse Recycling Council South PAC Santa Ana, CA 92705 Committee ID: 761465	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$500.00	2016P: \$2,250.00 2016G: \$250.00
8/19/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$65,000.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
SUBTOTAL						

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(other than PTY or SCC)
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 07/01/2016 through 09/24/2016		CALIFORNIA FORM 460 Page 12 of 100
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/23/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$20,000.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
9/23/2016	***RETURNED*** CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		(\$100,000.00)	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
9/23/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100,000.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
8/11/2016	California Assoc of Community Managers PAC Laguna Hills, CA 92653 Committee ID: 983494	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016P: \$1,500.00 2016G: \$1,500.00
9/21/2016	California Assoc of Health Facilities Sacramento, CA 95816 Committee ID: 741816	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$3,000.00	2016P: \$1,000.00 2016G: \$2,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 07/01/2016 through 09/24/2016		CALIFORNIA FORM 460 Page 13 of 100
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NAME OF FILER

Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/19/2016	California Assoc of Marriage & Family Therapists PAC Sacramento, CA 95814 Committee ID: 801218	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$4,000.00	2016P: \$2,000.00 2016G: \$3,000.00
8/26/2016	California Association of Highway Patrolmen PAC Sacramento, CA 95818 Committee ID: 802001	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
8/15/2016	California Beer & Beverage Distributors Community Affairs Sacramento, CA 95814 Committee ID: 761487	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$4,500.00	2016P: \$3,000.00 2016G: \$3,000.00
8/12/2016	California Building Industry Assoc PAC Sacramento, CA 95814 Committee ID: 890483	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,200.00	\$4,200.00	2016P: \$4,200.00 2016G: \$4,200.00
7/30/2016	California Business Properties Assoc. PAC Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/8/2016	California Cable & Telecommunications Assn PAC Sacramento, CA 95814 Committee ID: 745932	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2016P: \$3,000.00 2016G: \$1,500.00
8/19/2016	CHAMBERPAC California Chamber of Commerce PAC Sacramento, CA 95814 Committee ID: 950352	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016P: \$1,500.00 2016G: \$1,500.00
8/26/2016	California Defense Counsel PAC Sacramento, CA 95814 Committee ID: 850665	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$2,000.00	2016P: \$1,000.00 2016G: \$1,000.00
9/23/2016	California Forestry Assoc PAC Sacramento, CA 95814 Committee ID: 761244	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$995.00	\$995.00	2016P: \$280.67 2016G: \$995.00
7/11/2016	Spn by CA Assoc of Hospitals & Health Systems California Hospital Assoc PAC Sacramento, CA 95814 Committee ID: 790773	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$4,500.00	2016P: \$4,000.00 2016G: \$2,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 07/01/2016		CALIFORNIA FORM 460
through 09/24/2016		
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NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/2/2016	California Independent Oil Marketers PAC Sacramento, CA 95834 Committee ID: 760982	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
8/24/2016	California Independent Telephone Sacramento, CA 95814 Committee ID: 771171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
9/19/2016	CALPAC California Medical Assoc PAC Sacramento, CA 95814 Committee ID: 742617	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$4,200.00	2016P: \$4,200.00 2016G: \$1,500.00
9/23/2016	California Metals Coalition PAC El Dorado Hills, CA 95762 Committee ID: 1264568	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016P: \$250.00 2016G: \$1,000.00
9/13/2016	Sovereignty Protection Fund California Nations Indian Gaming Assoc Los Angeles, CA 90071 Committee ID: 1266480	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$5,000.00	2016P: \$2,500.00 2016G: \$2,500.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u>		CALIFORNIA FORM 460
through <u>09/24/2016</u>		
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NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/2016	California Nevada Beverage Assoc PAC Sacramento, CA 95814 Committee ID: 802438	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
8/29/2016	California Pharmacists PAC San Rafael, CA 94901 Committee ID: 1291777	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
8/28/2016	CAL RAD PAC California Radiological PAC Sacramento, CA 95814 Committee ID: 811596	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00 2016G: \$1,000.00
8/25/2016	CREPAC California Real Estate PAC Los Angeles, CA 90020 Committee ID: 890106	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$8,500.00	\$8,500.00	2016P: \$8,500.00 2016G: \$8,500.00
9/8/2016	California Resources Corp Los Angeles, CA 90024	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016P: \$1,500.00 2016G: \$4,200.00
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Marc Steinorth for Assembly 2016	I.D. Number 1373710
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/11/2016	California Staffing Professionals PAC Sacramento, CA 95814 Committee ID: 790158	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
8/24/2016	CSI California Steel Industries Fontana, CA 92335	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$2,000.00	2016P: \$1,000.00 2016G: \$1,000.00
8/11/2016	CARGO PAC California Trucking Assoc Sacramento, CA 95834 Committee ID: 760458	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,200.00	\$6,400.00	2016P: \$4,200.00 2016G: \$4,200.00
9/23/2016	CalPortland Co Glendora, CA 91741	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
9/20/2016	Wayne Carey Rancho Cucamonga, CA 91737	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CW Construction Contractor	\$1,000.00	\$1,000.00	2016G: \$1,000.00

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 18 of 100
NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

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8/15/2016	Centene Management Co Saint Louis, MO 63105	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016P: \$1,000.00 2016G: \$1,500.00
8/28/2016	Comcast Philadelphia, PA 19103	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2016P: \$1,500.00 2016G: \$1,500.00
9/21/2016	Construction Employers Assoc PAC Sacramento, CA 95821 Committee ID: 990629	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$3,000.00	2016P: \$1,000.00 2016G: \$2,000.00
9/21/2016	Eugene Cramer Redlands, CA 92373	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	\$198.00	2016P: \$98.00 2016G: \$100.00
9/21/2016	Scott Denton Rancho Cucamonga, CA 91730	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Safe & Security Corp CEO	\$4,100.00	\$4,100.00	2016P: \$300.00 2016G: \$4,100.00

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u> through <u>09/24/2016</u>		CALIFORNIA FORM 460 Page <u>19</u> of <u>100</u>
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NAME OF FILER

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9/11/2016	Devon Mathis for Assembly 2016 Willows, CA 95988 Committee ID: 1373851	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$4,200.00	2016G: \$4,200.00
9/23/2016	Devon Mathis for Assembly 2016 Willows, CA 95988 Committee ID: 1373851	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,200.00	\$4,200.00	2016G: \$4,200.00
8/29/2016	Disney Worldwide Lake Buena Vista, FL 32830	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
9/8/2016	Distilled Spirits Council Washington, DC 20005	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
8/18/2016	Charles Eddleman Redlands, CA 92374	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	\$100.00	2016G: \$100.00
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
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8/31/2016	Enterprise Holdings Inc PAC Saint Louis, MO 63105 Committee ID: 992324	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2016P: \$4,200.00 2016G: \$1,800.00
8/19/2016	Sponsored by the Civil Justice Assoc of CA Fair PAC Sacramento, CA 95814 Committee ID: 1311499	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$2,000.00	2016P: \$2,000.00 2016G: \$1,000.00
9/3/2016	Farmers Group Inc Woodland Hills, CA 91367	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2016P: \$4,200.00 2016G: \$2,500.00
7/27/2016	Paul Foster Redlands, CA 92373	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kaiser Permanente Administrator	\$250.00	\$250.00	2016G: \$250.00
8/10/2016	Gallagher for Assembly 2016 Elk Grove, CA 95624 Committee ID: 1373726	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016G: \$4,200.00
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/13/2016	Genentech South San Francisco, CA 94080	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2016P: \$3,000.00 2016G: \$1,500.00
9/13/2016	Glennon Gray Newport Beach, CA 92663	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FirstService Residential Property Management	\$1,000.00	\$1,000.00	2016G: \$1,000.00
9/15/2016	Howard Jarvis Taxpayers Assoc PAC Sacramento, CA 95814 Committee ID: 1238271	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$7,500.00	\$14,500.00	2016P: \$8,500.00 2016G: \$8,500.00
8/6/2016	B. Wayne Hughes Jr. Malibu, CA 90265	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	B.Wayne Hughes Foundation Founder	\$4,200.00	\$4,200.00	2016G: \$4,200.00
8/31/2016	IIPAC Independent Insurance PAC Granite Bay, CA 95746 Committee ID: 743103	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00 2016G: \$1,000.00

SUBTOTAL

*Contributor Codes
IND - Individual
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(other than PTY or SCC)
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 22 of 100
NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/14/2016	Qdoba Mexican Grill Jack in the Box San Diego, CA 92123	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
9/7/2016	Johnson & Johnson Washington, DC 20005	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
9/13/2016	JP Morgan Chase & Co PAC Washington, DC 20004 Committee ID: C00128512	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
7/30/2016	KAR Construction Ontario, CA 91762	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016P: \$500.00 2016G: \$1,000.00
7/14/2016	Michael Kennedy Rancho Cucamonga, CA 91737	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Estelle & Kennedy Attorney	\$2,000.00	\$2,000.00	2016P: \$2,012.42 2016G: \$2,000.00

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u>		CALIFORNIA FORM 460
through <u>09/24/2016</u>		
		Page <u>23</u> of <u>100</u>
		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/5/2016	Koch Industries Wichita, KS 67220	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016P: \$1,000.00 2016G: \$4,200.00
8/2/2016	Lovingood for Board of Supervisor 2016 Elk Grove, CA 95624	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
9/20/2016	Tim Lynch Upland, CA 91786	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Outdoor Advertising VP	\$250.00	\$250.00	2016G: \$250.00
9/19/2016	Maienschein for Assembly 2016 La Mesa, CA 91941 Committee ID: 1374225	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016G: \$4,200.00
8/2/2016	Mallinckrodt Enterprises Washington, DC 20004	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,750.00	2016P: \$2,500.00 2016G: \$2,750.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 07/01/2016 through 09/24/2016	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

I.D. Number
1373710

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/8/2016	Mallinckrodt Enterprises Washington, DC 20004	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,250.00	\$3,750.00	2016P: \$2,500.00 2016G: \$2,750.00
7/26/2016	David Mayo Rancho Cucamonga, CA 91730	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self/David Mayo Insurance Sales	\$500.00	\$700.00	2016P: \$750.00 2016G: \$500.00
8/16/2016	Mitsubishi Cement Corp Lucerne Valley, CA 92356	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016P: \$2,100.00 2016G: \$1,000.00
9/13/2016	NAIOP PAC National Association Industrial & Office Properties Irvine, CA 92618 Committee ID: 950520	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,500.00	\$3,500.00	2016G: \$3,500.00
9/8/2016	NFIB Washington, DC 20004	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$2,000.00	2016P: \$500.00 2016G: \$1,500.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 25 of 100

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

I.D. Number
1373710

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/9/2016	Jim Nolin Redlands, CA 92373	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Sales	\$250.00	\$250.00	2016G: \$250.00
8/26/2016	Oak Tree Arcadia, CA 91007	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2016P: \$1,000.00 2016G: \$500.00
8/15/2016	J. M. Olchawa Grand Terrace, CA 92313	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$500.00	\$500.00	2016G: \$500.00
8/19/2016	Pacific Egg & Poultry Assoc PAC Sacramento, CA 95814 Committee ID: 983310	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
9/21/2016	Patterson for Assembly 2016 Fresno, CA 93721 Committee ID: 1374569	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$8,400.00	2016P: \$4,200.00 2016G: \$4,200.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u> through <u>09/24/2016</u>		CALIFORNIA FORM 460 Page <u>26</u> of <u>100</u>
I.D. Number 1373710		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/1/2016	Personal Insurance Federation of CA Agents & Employees PAC Sacramento, CA 95814 Committee ID: 1338487	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,075.00	\$4,075.00	2016P: \$4,200.00 2016G: \$4,200.00
9/19/2016	Pfizer Inc Memphis, TN 38115	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$2,500.00	2016P: \$2,000.00 2016G: \$1,500.00
7/26/2016	Phillip Chen for Assembly 2016 Long Beach, CA 90802	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016G: \$4,200.00
9/14/2016	Phillips 66 Co Washington, DC 20004	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$5,700.00	2016P: \$1,500.00 2016G: \$4,200.00
8/24/2016	Recology Inc San Francisco, CA 94111	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u>		CALIFORNIA FORM 460
through <u>09/24/2016</u>		
		Page <u>27</u> of <u>100</u>
NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/15/2016	SBPOA San Bernardino Police Officers Assoc San Bernardino, CA 92406 Committee ID: 980235	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016G: \$4,200.00
9/22/2016	Sempra Energy San Diego, CA 92101	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,599.00	2016P: \$3,300.00 2016G: \$1,599.00
7/18/2016	Derek Sheeler Lebanon, NH 03766	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$1,000.00	\$1,000.00	2016G: \$1,000.00
8/2/2016	Michael Snook Rancho Cucamonga, CA 91701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	\$100.00	2016G: \$100.00
8/17/2016	Table Mountain Rancheria Friant, CA 93626	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016P: \$1,500.00 2016G: \$1,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 28 of 100

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

I.D. Number

1373710

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/7/2016	Tenet Health Anaheim, CA 92806	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2016P: \$3,000.00 2016G: \$1,500.00
8/29/2016	The Hartford Advocates Fund Hartford, CT 06115	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
9/23/2016	UP Railroad Co Panorama City, CA 91402	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2016G: \$1,500.00
7/18/2016	Vanguard Builders, Inc. Upland, CA 91785	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016G: \$4,200.00
9/3/2016	Walmart Bentonville, AR 72716	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,000.00	\$4,000.00	2016P: \$2,000.00 2016G: \$4,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 29 of 100

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Marc Steinorth for Assembly 2016	I.D. Number 1373710
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/2/2016	Joyce Waner Redlands, CA 92373	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$350.00	\$350.00	2016G: \$350.00
8/5/2016	Watson Land Co Carson, CA 90745	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$3,700.00	2016P: \$4,200.00 2016G: \$2,500.00
9/3/2016	David Werner Loma Linda, CA 92354	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$99.00	\$198.00	2016P: \$99.00 2016G: \$99.00
8/26/2016	Western Manufactured Housing Communities Assn PAC Sacramento, CA 95814 Committee ID: 742422	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00	\$4,200.00	2016P: \$4,200.00 2016G: \$4,200.00
8/24/2016	Wine Institute California PAC Sacramento, CA 95814 Committee ID: 1277874	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$2,000.00	2016G: \$2,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2016</u>		CALIFORNIA FORM 460
through <u>09/24/2016</u>		
		Page <u>30</u> of <u>100</u>
NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/1/2016	Alice Woods Rancho Cucamonga, CA 91701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$1,000.00	\$1,000.00	2016P: \$250.00 2016G: \$1,000.00
9/13/2016	Yocha Dehe Wintun Nation Brooks, CA 95606	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2016P: \$1,000.00 2016G: \$2,000.00
8/8/2016	Zenith Insurance Company Woodland Hills, CA 91367	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,000.00	\$3,000.00	2016G: \$3,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL				\$316,919.00		

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Schedule B - Part 1 Loans Received

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Amounts may be rounded
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SCHEDULE B - PART 1

Statement covers period
from 07/01/2016
through 09/24/2016

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

I.D. NUMBER
1373710

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Brian Dahle for Assembly 2018 Willows, CA 95988 Committee ID: 1373730 <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00		<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$4,200.00 12/31/2017 DATE DUE	 RATE %	\$4,200.00 4/23/2016 DATE INCURRED	CALENDAR YEAR \$8,400.00 PER ELECTION** 2016P: \$4,200.00 2016G: \$4,200.00
Brian Dahle for Assembly 2018 Willows, CA 95988 Committee ID: 1373730 Memo Reference: PAY1097 <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			\$4,200.00	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$4,200.00 DATE DUE	 RATE %	\$4,200.00 9/20/2016 DATE INCURRED	CALENDAR YEAR \$8,400.00 PER ELECTION** 2016P: \$4,200.00 2016G: \$4,200.00
Marc Steinorth Rancho Cucamonga, CA 91737 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Assemblyman State of CA	\$50,000.00		<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$50,000.00 DATE DUE	 RATE %	\$50,000.00 3/9/2015 DATE INCURRED	CALENDAR YEAR \$0.00 PER ELECTION** 2016P: \$50,000.00

SUBTOTALS

Schedule B Summary

1. Loans received this period. \$4,200.00
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period \$0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) \$4,200.00
Enter the net here and on the Summary Page, Column A, Line 2. **Net** (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 07/01/2016
through 09/24/2016

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

I.D. NUMBER
1373710

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Travis Allen for Assembly 2016 Willows, CA 95988 Committee ID: 1373831 <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,200.00		<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$4,200.00 12/31/2017 DATE DUE	 RATE %	\$4,200.00 1/26/2016 DATE INCURRED	CALENDAR YEAR \$4,200.00 PER ELECTION** 2016P: \$4,200.00
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		RATE %		CALENDAR YEAR PER ELECTION**
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		RATE %		CALENDAR YEAR PER ELECTION**
SUBTOTALS							\$4,200.00	\$62,600.00

Schedule B Summary

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____
Enter the net here and on the Summary Page, Column A, Line 2.

Net _____
(may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>07/01/2016</u> through <u>09/24/2016</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 07/01/2016 through 09/24/2016	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/8/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		VOIP minutes	\$801.98	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
9/8/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		Media Buy	\$73,760.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
9/15/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		TEL	\$140,382.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
7/18/2016	California Trailblazers Sacramento, CA 95814 Committee ID: 1373710	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		FND	\$260.72	\$6,877.66	2016P: \$4,200.00 2016G: \$3,260.72

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$267,302.53

Schedule C Summary

- | | |
|--|---------------------------|
| 1. Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.)..... | \$267,302.53 |
| 2. Amount received this period - unitemized nonmonetary contributions of less than \$100 | \$0.00 |
| 3. Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) | TOTAL \$267,302.53 |

*Contributor Codes
IND - Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period

from 07/01/2016

through 09/24/2016

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

I.D. Number
1373710

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
7/27/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		VOIP minutes	\$495.68	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
7/8/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		VOIP minutes	\$1,388.32	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
8/5/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		Research	\$4,000.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
8/5/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		Headquarters Rent	\$3,200.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
2. Amount received this period - unitemized nonmonetary contributions of less than \$100
3. Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes

IND - Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 07/01/2016 through 09/24/2016	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
8/5/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		VOIP minutes	\$1,385.73	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
8/9/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		VOIP minutes	\$800.61	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
8/9/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		VOIP minutes	\$1,330.49	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
8/17/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		VOIP minutes	\$2,497.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
IND - Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>07/01/2016</u> through <u>09/24/2016</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
8/17/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		POL	\$37,000.00	\$470,429.31	2016P: \$64,990.57 2016G: \$412,938.74
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$267,302.53

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
 IND - Individual
 COM- Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period

from 07/01/2016

through 09/24/2016

CALIFORNIA
FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

I.D. NUMBER

1373710

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/12/2016	Golden State Voter Participation Project	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$7,000.00	\$7,000.00	2016P: \$50,000.00 2016G: \$7,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL \$7,000.00

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) **\$7,000.00**
- Unitemized contributions and independent expenditures made this period of under \$100 **\$0.00**
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$7,000.00**

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from 07/01/2016 through 09/24/2016		CALIFORNIA FORM 460 Page 39 of 100
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Meridian Pacific Inc Sacramento, CA 95825	CNS			\$5,000.00
Wendy Warfield & Associates Sacramento, CA 95814	FND			\$5,096.94
FedEx Pasadena, CA 91109	POS			\$65.40

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$451,144.81
2. Unitemized payments made this period of under \$100.	\$89.50
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$451,234.31

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Wendy Warfield & Associates Sacramento, CA 95814	FND			\$1,953.00
Raul Guzman Riverside, CA 92507	CMP			\$630.00
Vanessa Rodriguez Fontana, CA 92336	CMP			\$315.00
Clementine Garrett San Bernardino, CA 92407	CMP			\$520.00
Liz Pinedo Fontana, CA 92336	CMP			\$210.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Macy Proctor Rancho Cucamonga, CA 91739	CMP			\$310.00
Robert Pedrini Lancaster, CA 93535	CMP			\$210.00
Steve Pedrini Lancaster, CA 93535	CMP			\$677.50
Jordan Gurnett Rancho Cucamonga, CA 91730	CMP			\$293.30
Kayla Jackson Pomona, CA 91768	CMP			\$940.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Alexis Leicht Gilbert, AZ 85298	CMP			\$210.00
John Millner Downey, CA 90240	CMP			\$367.50
Iman Rejali Mission Viejo, CA 92691	CMP			\$470.00
Hannah Scheenstra Ontario, CA 91762	CMP			\$682.50
Elvira Reyes Redlands, CA 92374	CMP			\$630.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Donald Hall Chino, CA 91710	CMP			\$52.00
David Chang Pomona, CA 91768	CMP			\$680.00
Cameron Griffin La Verne, CA 91750	CMP			\$840.00
Brittany Griffin Glendora, CA 91741	CMP			\$940.00
Alexandra Zuniga Upland, CA 91784	CMP			\$682.50

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Alexander Valenzuela La Verne, CA 91750	CMP			\$315.00
Alejandra Reyes Loma Linda, CA 92354	CMP			\$682.50
Anthony Medrano San Berenardino, CA	CMP			\$105.00
Kimberly Zuniga Upland, CA 91786	CMP			\$556.50
Krista Salto Victorville, CA 92392	CMP			\$890.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kelsi Robinson Lakewood, CA 90712	CMP			\$420.00
Kenneth Knoblock San Bernardino, CA 92407	CMP			\$1,150.00
David Asbra Rancho Cucamonga, CA 91701	CMP			\$760.00
Jordan Gurnett Rancho Cucamonga, CA 91730	CMP			\$5,000.00
Anedot.com Baton Rouge, LA 70801			CC Processing	\$4.20

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FedEx Pasadena, CA 91109	POS			\$25.54
Meridian Pacific Inc Sacramento, CA 95825	TEL			\$80,000.00
Golden State Voter Participation Project Sacramento, CA 95814	CTB			\$7,000.00
Committee ID: 1345010 Anedot.com Baton Rouge, LA 70801		cc Processing		\$39.30
Anedot.com Baton Rouge, LA 70801		cc Processing		\$1.27

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Wendy Warfield & Associates Sacramento, CA 95814	FND			\$4,150.00
Lee Maxton Inc Minuteman Press Rancho Cucamonga, CA 91730	LIT			\$11,450.40
Meridian Pacific Inc Sacramento, CA 95825	CMP			\$580.28
RC Community Foundation Rancho Cucamonga, CA 91730	CVC			\$2,880.00
Lysa Ray Campaign Services Santa Ana, CA 92705	PRO			\$750.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Meridian Pacific Inc Sacramento, CA 95825	LIT			\$752.94
Meridian Pacific Inc Sacramento, CA 95825	CNS			\$5,000.00
Anedot.com Baton Rouge, LA 70801		cc Processing		\$41.16
Anedot.com Baton Rouge, LA 70801		cc Processing		\$160.20
Color Press Printing Paramount, CA 90723	LIT			\$675.00

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Schedule E (Continuation Sheet) Payments Made

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Michael Ornelas Fontana, CA 92336	CMP			\$495.42
Lee Maxton Inc Minuteman Press Rancho Cucamonga, CA 91730	LIT			\$11,233.61
Kimberly Zuniga Upland, CA 91786	CMP			\$780.00
Alexandra Zuniga Upland, CA 91784	CMP			\$520.00
Cameron Griffin La Verne, CA 91750	CNS			\$940.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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Marc Steinorth for Assembly 2016

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Brittany Griffin Glendora, CA 91741	CMP			\$735.00
Krista Salto Victorville, CA 92392	CMP			\$840.00
Kenneth Knoblock San Bernardino, CA 92407	CMP			\$420.00
Kayla Jackson Pomona, CA 91768	CMP			\$735.00
John Millner Downey, CA 90240	CMP			\$300.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Iman Rejali Mission Viejo, CA 92691	CMP			\$630.00
Hannah Scheenstra Ontario, CA 91762	CMP			\$700.00
Elvira Reyes Redlands, CA 92374	CMP			\$730.00
Alejandra Reyes Loma Linda, CA 92354	CMP			\$835.00
Donald Hall Chino, CA 91710	CMP			\$100.00

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Schedule E (Continuation Sheet) Payments Made

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
David Asbra Rancho Cucamonga, CA 91701	CMP			\$760.00
Clementine Garrett San Bernardino, CA 92407	CMP			\$520.00
Alexander Valenzuela La Verne, CA 91750	CMP			\$520.00
Anthony Medrano San Berenardino, CA	CMP			\$210.00
Macy Proctor Rancho Cucamonga, CA 91739	CMP			\$620.00

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Schedule E (Continuation Sheet) Payments Made

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Raul Guzman Riverside, CA 92507	CMP			\$730.00
Steve Pedrini Lancaster, CA 93535	CMP			\$620.00
Vanessa Rodriguez Fontana, CA 92336	CMP			\$158.00
Impact Signage Grass Valley, CA 95945	CMP			\$6,075.00
COGS Santa Ana, CA 92707	CMP			\$8,164.80

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Schedule E (Continuation Sheet) Payments Made

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Gregory Young Bloomington, CA 92316	CMP			\$150.00
Scott Olson Highland, CA 92346	CMP			\$100.00
Anedot.com Baton Rouge, LA 70801		cc Processing		\$10.05
Lee Maxton Inc Minuteman Press Rancho Cucamonga, CA 91730	POS			\$14,602.47
Chase Card Palatine, IL 60094	CMP			\$13,089.90

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Schedule E (Continuation Sheet) Payments Made

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FedEx Pasadena, CA 91109	POS			\$57.40
The Grapevine Press Rancho Cucamonga, CA 91701	PRT			\$200.00
Wendy Warfield & Associates Sacramento, CA 95814	FND			\$7,686.30
Meridian Pacific Inc Sacramento, CA 95825	TEL			\$4,694.11
Meridian Pacific Inc Sacramento, CA 95825	WEB			\$4,414.70

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Schedule E (Continuation Sheet) Payments Made

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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Meridian Pacific Inc Sacramento, CA 95825	RAD			\$4,867.62
Meridian Pacific Inc Sacramento, CA 95825	RAD			\$5,941.15
Meridian Pacific Inc Sacramento, CA 95825	RAD			\$1,500.00
Meridian Pacific Inc Sacramento, CA 95825	CMP			\$323.50
Meridian Pacific Inc Sacramento, CA 95825	RAD			\$1,120.50

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Meridian Pacific Inc Sacramento, CA 95825	LIT			\$4,705.88
Meridian Pacific Inc Sacramento, CA 95825	CMP			\$77.01
Wendy Warfield & Associates Sacramento, CA 95814	FND			\$1,227.27
FedEx Pasadena, CA 91109	POS			\$31.70
Anedot.com Baton Rouge, LA 70801			CC Processing	\$4.20

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot.com Baton Rouge, LA 70801			cc Processing	\$4.20
Meridian Pacific Inc Sacramento, CA 95825	LIT			\$3,108.14
David Asbra Rancho Cucamonga, CA 91701	CMP			\$1,520.00
Ryan Hoffman Rancho Cucamonga, CA 91701	CMP			\$475.00
Michael Ornelas Fontana, CA 92336	CMP			\$489.58

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot.com Baton Rouge, LA 70801			CC Processing	\$39.30
SouthWest Airlines Dallas, TX 75238	CMP			\$494.36
Meridian Pacific Inc Sacramento, CA 95825	WEB			\$30,000.00
Meridian Pacific Inc Sacramento, CA 95825	CMP			\$95.05
Kelsi Robinson Lakewood, CA 90712	CMP			\$90.50

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kenneth Knoblock San Bernardino, CA 92407	CMP			\$620.00
Kayla Jackson Pomona, CA 91768	CMP			\$810.00
Iman Rejali Mission Viejo, CA 92691	CMP			\$530.00
Alexandra Zuniga Upland, CA 91784	CMP			\$910.00
Hannah Scheenstra Ontario, CA 91762	CMP			\$910.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME OF FILER
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Donald Hall Chino, CA 91710	CMP			\$720.00
Cameron Griffin La Verne, CA 91750	CMP			\$910.00
Brittany Griffin Glendora, CA 91741	CMP			\$810.00
Alexander Valenzuela La Verne, CA 91750	CMP			\$910.00
Alejandra Reyes Loma Linda, CA 92354	CMP			\$430.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anthony Medrano San Bernardino, CA	CMP			\$240.00
Alexis Leicht Gilbert, AZ 85298	CMP			\$810.00
David Machado San Dimas, CA 91773	CMP			\$910.00
Mark Bramble Jr. Victorville, CA 92392	CMP			\$910.00
Mark Bramble Victorville, CA 92392	CMP			\$530.00

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Matthew Bramble Victorville, CA 92392	CMP			\$435.00
Vanessa Rodriguez Fontana, CA 92336	CMP			\$810.00
Raul Guzman Riverside, CA 92507	CMP			\$810.00
Mitchell Shepard Redlands, CA 92374	CMP			\$620.00
Michael Jraisat Rancho Cucamonga, CA 91739	CMP			\$430.00

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Schedule E (Continuation Sheet) Payments Made

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Michael Burnette Burbank, CA 91505	CMP			\$430.00
Kimberly Zuniga Upland, CA 91786	CMP			\$910.00
Lauren Stinner Rancho Cucamonga, CA 91701	CMP			\$285.00
Krista Salto Victorville, CA 92392	CMP			\$910.00
Color Press Printing Paramount, CA 90723	CMP			\$675.00

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Meridian Pacific Inc Sacramento, CA 95825	LIT		\$21,057.65
FedEx Pasadena, CA 91109	POS		\$25.42
Meridian Pacific Inc Sacramento, CA 95825	TEL		\$15,979.00
Meridian Pacific Inc Sacramento, CA 95825	TEL		\$2,494.00
Meridian Pacific Inc Sacramento, CA 95825	TEL		\$17,848.00

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot.com Baton Rouge, LA 70801			cc Processing	\$19.80
Jordan Gurnett Rancho Cucamonga, CA 91730	CMP			\$473.55
Meridian Pacific Inc Sacramento, CA 95825	CNS			\$5,000.00
FedEx Pasadena, CA 91109	POS			\$31.70
John Millner Downey, CA 90240	CMP			\$890.00

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Jordan Gurnett Rancho Cucamonga, CA 91730	CMP			\$5,000.00
David Chang Pomona, CA 91768	CMP			\$680.00
JiJun Wang Upland, CA 91786	CMP			\$470.00
Vincent Hebble Pomona, CA 91767	CMP			\$570.00
Kouri Robinson Lakewood, CA 90712	CMP			\$570.00

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Elvira Reyes Redlands, CA 92374	CMP			\$260.00
Donald Hall Chino, CA 91710	CMP			\$780.00
Alexis Leicht Gilbert, AZ 85298	CMP			\$890.00
Kenneth Knoblock San Bernardino, CA 92407	CMP			\$680.00
Alejandra Reyes Loma Linda, CA 92354	CMP			\$570.00

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Vanessa Rodriguez Fontana, CA 92336	CMP			\$470.00
Hannah Scheenstra Ontario, CA 91762	CMP			\$990.00
Cameron Griffin La Verne, CA 91750	CMP			\$990.00
Brittany Griffin Glendora, CA 91741	CMP			\$890.00
Kimberly Zuniga Upland, CA 91786	CMP			\$990.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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through 09/24/2016		Page 70 of 100
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kayla Jackson Pomona, CA 91768	CMP			\$890.00
Mitchell Shepard Redlands, CA 92374	CMP			\$680.00
Iman Rejali Mission Viejo, CA 92691	CMP			\$260.00
Michael Burnette Burbank, CA 91505	CMP			\$470.00
Kelsi Robinson Lakewood, CA 90712	CMP			\$570.00

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anthony Medrano San Bernardino, CA	CMP			\$155.00
Raul Guzman Riverside, CA 92507	CMP			\$890.00
Alexander Valenzuela La Verne, CA 91750	CMP			\$680.00
Alexandra Zuniga Upland, CA 91784	CMP			\$940.00
David Machado San Dimas, CA 91773	CMP			\$890.00

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mark Bramble Jr. Victorville, CA 92392	CMP			\$890.00
Krista Salto Victorville, CA 92392	CMP			\$890.00
Matthew Bramble Victorville, CA 92392	CMP			\$470.00
Lauren Stinner Rancho Cucamonga, CA 91701	CMP			\$365.00
David Asbra Rancho Cucamonga, CA 91701	CMP			\$1,520.00

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Michael Jraisat Rancho Cucamonga, CA 91739	CMP			\$430.00
Anedot.com Baton Rouge, LA 70801		cc Processing		\$39.30
Lysa Ray Campaign Services Santa Ana, CA 92705	PRO			\$750.00
Wendy Warfield & Associates Sacramento, CA 95814	FND			\$1,050.00
Socorro Pantaleon Chino, CA 91710	CMP			\$1,000.00

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Statement covers period		CALIFORNIA FORM 460
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FedEx Pasadena, CA 91109	POS			\$24.43
FedEx Pasadena, CA 91109	POS			\$25.54
Lee Maxton Inc Minuteman Press Rancho Cucamonga, CA 91730	LIT			\$23,573.61
Vanessa Rodriguez Fontana, CA 92336	CMP			\$470.00
Vincent Hebble Pomona, CA 91767	CMP			\$420.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Marc Steinorth for Assembly 2016		I.D. NUMBER 1373710

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ryan Hoffman Rancho Cucamonga, CA 91701	CMP			\$260.00
Raul Guzman Riverside, CA 92507	CMP			\$890.00
Mark Bramble Jr. Victorville, CA 92392	CMP			\$785.00
Mark Bramble Victorville, CA 92392	CMP			\$100.00
Lauren Stinner Rancho Cucamonga, CA 91701	CMP			\$680.00

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Alexandra Zuniga Upland, CA 91784	CMP			\$732.50
Kimberly Zuniga Upland, CA 91786	CMP			\$428.00
Krista Salto Victorville, CA 92392	CMP			\$890.00
Kelsi Robinson Lakewood, CA 90712	CMP			\$420.00
Kenneth Knoblock San Bernardino, CA 92407	CMP			\$680.00

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kayla Jackson Pomona, CA 91768	CMP			\$890.00
JiJun Wang Upland, CA 91786	CMP			\$470.00
John Millner Downey, CA 90240	CMP			\$890.00
Iman Rejali Mission Viejo, CA 92691	CMP			\$260.00
Hannah Scheenstra Ontario, CA 91762	CMP			\$950.50

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Elvira Reyes Redlands, CA 92374	CMP			\$680.00
Donald Hall Chino, CA 91710	CMP			\$386.00
David Chang Pomona, CA 91768	CMP			\$680.00
David Asbra Rancho Cucamonga, CA 91701	CMP			\$760.00
Cameron Griffin La Verne, CA 91750	CMP			\$890.00

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Brittany Griffin Glendora, CA 91741	CMP			\$890.00
Alexander Valenzuela La Verne, CA 91750	CMP			\$680.00
Alejandra Reyes Loma Linda, CA 92354	CMP			\$470.00
Anthony Medrano San Berenardino, CA	CMP			\$260.00
Meridian Pacific Inc Sacramento, CA 95825	TEL			\$6,270.59

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Wendy Warfield & Associates Sacramento, CA 95814	FND			\$3,050.00
SouthWest Airlines Dallas, TX 75238	CMP			\$2,068.57
Redlands Animal Shelter Redlands, CA 92373	CVC			\$1,560.00
San Bernardino City Dept of Animal Control San Bernardino, CA 92408	CVC			\$1,260.00
San Bernardino City Dept of Animal Control San Bernardino, CA 92408	CMP			\$990.00

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Alexis Leicht Gilbert, AZ 85298	CMP			\$210.00
JiJun Wang Upland, CA 91786	CMP			\$470.00
Color Press Printing Paramount, CA 90723	LIT			\$1,350.00

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SUBTOTAL \$451,144.81

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period
from 07/01/2016
through 09/24/2016

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I.D. NUMBER
1373710

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** _____
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** _____
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** _____
May be a negative number.

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER
Marc Steinorth for Assembly 2016

I.D. NUMBER
1373710

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Chase Card

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Valassis Direct Mail	LIT			\$11,197.24
Facebook Menlo Park, CA 94025	WEB			\$583.92
The ImagEmporium	CMP			\$1,258.74

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$13039.90

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

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I.D. NUMBER
1373710

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Jordan Gurnett

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ralph's Rancho Cucamonga, CA 91730	CMP			\$284.67
Ralph's Rancho Cucamonga, CA 91730	CMP			\$399.07

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$683.74

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I.D. NUMBER
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NAME OF AGENT OR INDEPENDENT CONTRACTOR
Landslide Communications INC

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
California Public Safety Voter Guide Laguna Niguel, CA 92677	LIT			\$2,983.00
1298740 National Tax Limitation Committee Early Voter Guide Laguna Niguel, CA 92677	LIT			\$2,983.00
1306386 Save Prop 13 Laguna Niguel, CA 92677	LIT			\$2,984.00
598040 Woman's Voice Laguna Niguel, CA 92677	LIT			\$2,983.00
1293667				

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$11933.00

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Landslide Communications INC

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Small Business Action Committee Newsletter Laguna Niguel, CA 92677	LIT			\$2,983.00
1322823				

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TOTAL* \$2983.00

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1373710

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Meridian Pacific Inc

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Latino Family Voter Guide Long Beach, CA 90802 Memo Reference: EDT23	LIT			\$2,641.92
Magma Creative, Inc. Roseville, CA 95678 Memo Reference: EDT26	TEL			\$13,582.17
Magma Creative, Inc. Roseville, CA 95678 Memo Reference: EDT27	TEL			\$2,120.00
Landslide Communications INC Laguna Niguel, CA 92677 Memo Reference: EDT25	LIT			\$17,899.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$36243.09

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KB VoiceOvers Watkinsville, GA 30677	RAD			\$275.00
Luke Garcia Elk Grove, CA 95758	RAD			\$515.00
Digital Advertising Buy Reston, VA 20190	TEL			\$68,000.00
DC Goods Lincoln, CA 95648	RAD			\$275.00

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TOTAL* \$69065.00

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Schedule G

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Continuing the Republican Revolution Newport Beach, CA 92660	LIT			\$640.00
CalSal Voter Guide Torrance, CA 90501	LIT			\$1,000.00
1368249 CableTime Orinda, CA 94563 Memo Reference: EDT28	TEL			\$15,170.80
Ca Voter Guide Torrance, CA 90501	LIT			\$1,000.00
595004				

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TOTAL* \$17810.80

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Schedule G

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Budget Watchdogs Torrance, CA 90501	LIT			\$2,000.00
1345115 Magma Creative, Inc. Roseville, CA 95678	TEL			\$3,505.00
Studio Z Recording, Inc. Sacramento, CA 95819	TEL			\$375.00
SouthWest Airlines Dallas, TX 75238	TRS			\$229.96

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TOTAL* \$6109.96

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Reynoso & Assoc Newcastle, CA 95658	CMP			\$175.00
Red Digital Reston, VA 20195 Memo Reference: EDT24	WEB			\$25,000.00
Octopus Audio Sacramento, CA 95814	RAD			\$437.50
Octopus Audio Sacramento, CA 95814	RAD			\$725.00

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TOTAL* \$26337.50

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Magma Creative, Inc. Roseville, CA 95678	CMP			\$3,315.00
Magma Creative, Inc. Roseville, CA 95678	WEB			\$3,165.00
Magma Creative, Inc. Roseville, CA 95678	RAD			\$3,275.00
Magma Creative, Inc. Roseville, CA 95678	RAD			\$3,725.00

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TOTAL* \$13480.00

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Magma Creative, Inc. Roseville, CA 95678	CMP			\$275.00
NK Media Sacramento, CA 95818	RAD			\$550.00
Octopus Audio Sacramento, CA 95814	TEL			\$1,200.00
Octopus Audio Sacramento, CA 95814	CMP			\$450.00

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TOTAL* \$2475.00

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Octopus Audio Sacramento, CA 95814	WEB			\$587.50
Octopus Audio Sacramento, CA 95814	RAD			\$587.50
Octopus Audio Sacramento, CA 95814	RAD			\$1,050.00

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TOTAL* \$2225.00

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to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 95 of 100

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NAME OF FILER
Marc Steinorth for Assembly 2016

I.D. NUMBER
1373710

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Lee Maxton Inc Minuteman Press

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
USPS Rancho Cucamonga, CA 91730	POS			\$6,785.87
USPS Rancho Cucamonga, CA 91730	POS			\$14,602.47
USPS Rancho Cucamonga, CA 91730	POS			\$6,288.71

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$27677.05

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER
Marc Steinorth for Assembly 2016

I.D. NUMBER
1373710

NAME OF AGENT OR INDEPENDENT CONTRACTOR
SouthWest Airlines

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
GoDaddy Gilbert, AZ 85233	WEB			\$462.00
Facebook Menlo Park, CA 94025	WEB			\$500.33
Classe Party Rental Rancho Cucamonga, CA 91730	CMP			\$464.40
Harry & David Costa Mesa, CA 92626	CMP			\$494.36

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1921.09

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period

from 07/01/2016

through 09/24/2016

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

I.D. NUMBER
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FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		SUBTOTALS						

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

1. Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) **NET**
(Enter the net here and on the Summary Page, Column A, Line 7.)

** If Required

(May be a negative number)

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period

from 07/01/2016

through 09/24/2016

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DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$.00

Schedule I Summary

- Increases to cash of \$100 or more this period..... \$.00
- Unitemized increases to cash under \$100 this period..... \$.00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$.00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$.00

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference: EXP1177
Check was not for this PAC

Memo Reference: EDT23
1166

Memo Reference: EDT24
1170

Memo Reference: EDT25
1206

Memo Reference: EDT26
1205

Memo Reference: EDT27
1204

Memo Reference: EDT28
1203

Memo Reference: PAY1097
LOAN
